

SERFF Tracking Number: META-128515818 State: Arkansas
 Filing Company: Teachers Insurance and Annuity Association of America State Tracking Number: RPT-LTC 2011
 Company Tracking Number: CY 2011 ANNUAL REPORTS DUE 2012_TIAA (CC)
 TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
 Product Name: Long Term Care
 Project Name/Number: LTCI Annual Reports/I12-02

Filing at a Glance

Company: Teachers Insurance and Annuity Association of America

Product Name: Long Term Care SERFF Tr Num: META-128515818 State: Arkansas
 TOI: LTC06 Long Term Care - Other SERFF Status: Closed-Accepted State Tr Num: RPT-LTC 2011
 For Informational Purposes
 Sub-TOI: LTC06.000 Long Term Care - Other Co Tr Num: CY 2011 ANNUAL State Status: Closed-Accepted for
 REPORTS DUE 2012_TIAA (CC) Informational Purposes
 Filing Type: Form Reviewer(s): Donna Lambert
 Disposition Date: 06/28/2012
 Authors: Cherise Crittenden,
 Andrea DeAlmeida
 Date Submitted: 06/28/2012 Disposition Status: Accepted For
 Informational Purposes
 Implementation Date: 06/28/2012
 Implementation Date Requested: On Approval
 State Filing Description:

General Information

Project Name: LTCI Annual Reports Status of Filing in Domicile:
 Project Number: I12-02 Date Approved in Domicile:
 Requested Filing Mode: Review & Approval Domicile Status Comments:
 Explanation for Combination/Other: Market Type:
 Submission Type: New Submission Overall Rate Impact:
 Filing Status Changed: 06/28/2012
 State Status Changed: 06/28/2012 Deemer Date:
 Created By: Cherise Crittenden Submitted By: Cherise Crittenden
 Corresponding Filing Tracking Number:
 Filing Description:
 Annual Compliance Reports, please see cover letter.
 State Narrative:

Company and Contact

Filing Contact Information

Cherise Crittenden, Consultant-Compliance cccrittenden@metlife.com

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MKTG

57 Green Farms Road 203-221-6594 [Phone]
Westport, CT 06880

Filing Company Information

Teachers Insurance and Annuity Association of America CoCode: 69345 State of Domicile: New York
730 Third Avenue Group Code: Company Type:
New York, NY 10017 Group Name: State ID Number:
(212) 578-2944 ext. 2944[Phone] FEIN Number: 13-1624203

Filing Fees

Fee Required? No
Retaliatory? No
Fee Explanation:
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Teachers Insurance and Annuity Association of America	\$0.00	06/28/2012	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Accepted For Informational Purposes	Donna Lambert	06/28/2012	06/28/2012

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Disposition

Disposition Date: 06/28/2012

Implementation Date:

Status: Accepted For Informational Purposes

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Flesch Certification		No
Supporting Document	Application		No
Supporting Document	Health - Actuarial Justification		No
Supporting Document	Outline of Coverage		No
Supporting Document	Cover Letter	Accepted for Informational Purposes	No
Supporting Document	Denied Claims	Accepted for Informational Purposes	No
Supporting Document	Lapse & Replacements	Accepted for Informational Purposes	No
Supporting Document	Suitability	Accepted for Informational Purposes	No

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Supporting Document Schedules

		Item Status:	Status Date:
Bypassed - Item:	Flesch Certification		
Bypass Reason:	Not applicable for this filing		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Application		
Bypass Reason:	Not applicable for this filing		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Health - Actuarial Justification		
Bypass Reason:	Not applicable for this filing		
Comments:			
		Item Status:	Status Date:
Bypassed - Item:	Outline of Coverage		
Bypass Reason:	Not applicable for this filing		
Comments:			
		Item Status:	Status Date:
Satisfied - Item:	Cover Letter	Accepted for Informational Purposes	06/28/2012
Comments:	Attached is the Cover Letter		
Attachment:			

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AR_Denied Claims Cover Letter due June 2012 for CY2011_MLIC.pdf

	Item Status:	Status Date:
Satisfied - Item: Denied Claims	Accepted for Informational Purposes	06/28/2012
Comments: Attached is the Denied Claims		
Attachment: AR_Denied Claims Report due June 2012 for CY2011_TIAA.pdf		

	Item Status:	Status Date:
Satisfied - Item: Lapse & Replacements	Accepted for Informational Purposes	06/28/2012
Comments: Attached is the Lapse & Replacements		
Attachment: AR_Lapse & Replacement Report due June 2012 for CY2011_TIAA.pdf		

	Item Status:	Status Date:
Satisfied - Item: Suitability	Accepted for Informational Purposes	06/28/2012
Comments: Attached is the Suitability		
Attachment: AR_Suitability Report due June 2012 for CY2011_TIAA.pdf		

Metropolitan Life Insurance Company
Long-Term Care
PO Box 937, Westport, CT 06881-0937



June 30, 2012

The Honorable Jay Bradford
Arkansas Insurance Department
1200 West Third Street
Little Rock, AR 72201-1904

Dear Commissioner Bradford:

Re: Metropolitan Life Insurance Company

In accordance with state long-term care insurance requirements, we are providing the attached reports for calendar year 2011:

- Denied Claims
- Lapse & Replacements
- Suitability

Respectfully,

A handwritten signature in black ink that reads "Thomas G. Reilly". The signature is written in a cursive, flowing style.

Thomas G. Reilly
Director of Product Management & Compliance

Enclosure(s)

**CLAIMS DENIAL REPORTING FORMS
LONG-TERM CARE INSURANCE**

**FOR THE STATE OF ARKANSAS
FOR THE REPORTING YEAR OF 2011
Due 2012**

Company Name: Metropolitan Life Insurance Company as **Due:** June 30 annually
Administrator for Teachers Insurance Annuity Association of America

Company Address: 57 Green Farms Road, Westport, CT 06880 **Phone Number:** (203) 221-6553
P.O. Box 937, Westport, CT 06881-9909
(for mailing only)

Company NAIC

Number: 69345

Contact Person: Thomas G. Reilly

Line of Business: Individual

Instructions:

The purpose of this form is to report all long-term care claim denials under in force long-term care insurance policies.

Indicate the manner of reporting by checking one of the boxes below:

- ☐ Per Claimant - counts each individual who makes one or a series of claim requests
☒ Per Transaction - counts each claim request

"Denied" means a claim that is not paid for any reason other than for failure to meet the waiting period or because of an applicable preexisting condition. It does not include claims that are duplicate submissions and were paid as a prior claim.

		STATE DATA	NATIONWIDE DATA ¹
1.	Total Number of Long-Term Care Claim Reported	120	18128
2.	Total Number of Long-Term Care Claims Denied/Not Paid	13	2,250
3.	Number of Claims Not paid due to Preexisting Condition Exclusion	0	0
4.	Number of Claims Not Paid due to Waiting <i>(Elimination)</i> Period not met	3	903
5.	Net Number of Long-Term Care Claims Denied for Reporting	10	1347

	purposes (<i>Line 2, Minus Line 3, Minus Line 4</i>)		
6.	Percentage of Long-Term Case Claim Denied of Those Reported (<i>Line 5 divided by Line 1</i>)	8.33%	7.43%
7.	Number Long-Term Care Claims Denied due to:		
8.	• Long-term Care Services Not Covered under the Policy ²	0	95
9.	• Provider/Facility Not Qualified under the Policy ³	1	148
10.	• Benefit Eligibility Criteria Not Met ⁴	3	42
11.	• Other ⁵	6	1062

1. The nationwide data may be viewed as a more representative and credible indicator where the data for claims reported and denied for your state are small in number.
2. Example – home health care claim filed under a nursing home only policy.
3. Example – a facility that does not meet the minimum level of care requirements or the licensing requirements as outlined in the policy.
4. Examples – a benefit trigger not met, certification by a licensed health care practitioner not provided, no plan of care.
5. Examples – Maximum lifetime benefit reached, services paid under another insurance.

**Long-Term Care Insurance
Replacement and Lapse Reporting Form**

For the State of Arkansas

Company Name: Metropolitan Life Insurance Company
As administrator for Teachers Insurance Annuity Assoc. of America
Company Address: Long-Term Care Group
57 Greens Farms Road
Westport, CT 06880
Contact Person: Thomas G. Reilly, Director of Product Management & Compliance

For the Reporting Year of 2011

Due: June 30th annually, June 2012

Company NAIC Number: **69345**

Phone Number: (203) 221-6553

Instructions

The purpose of this form is to report on a statewide basis information regarding long-term care insurance policy replacements and lapses. Specifically, every insurer shall maintain records for each agent on that agent's amount of long-term care insurance replacement sales as a percent of the agent's total annual sales and the amount of lapses of long-term care insurance policies sold by the agent as a percent of the agent's total annual sales. The tables below should be used to report the ten percent (10%) of the insurer's agents with the greatest percentages of replacements and lapses.

Listing of the 10% of Agents with the Greatest Percentage of Replacements

Agent's Name	Number of Policies Sold by this Agent	Number of Policies Replaced by this Agent	Number of Replacements as % of Number Sold by this Agent
N/A			

Listing of the 10% of Agents with the Greatest Percentage of Lapses

Agent's Name	Number of Policies Sold by this Agent	Number of Policies Lapsed by this Agent	Number of Lapses as % of Number Sold by this Agent
N/A			

Company Totals: (Individual & Group Business)

Percentage of Replacement Policies Sold to Total Annual Sales 0.00%

Percentage of Replacement Policies Sold to Policies In Force (as of the end of the preceding calendar year) 0.00%

Percentage of Lapsed Policies Sold to Total Annual Sales 0.00%

Percentage of Lapsed Policies Sold to Policies In Force (as of the end of the preceding calendar year) 2.67%

**LONG-TERM CARE INSURANCE
SUITABILITY REPORT
Group & Individual Business**

**For the CALENDAR YEAR 2011
Due: June 30, 2012**

For the State of: **Arkansas**

Company Name: Metropolitan Life Insurance Company as administrator for
Teachers Insurance Annuity Association of America
NAIC #: 69345
Company Address: Long-Term Care
57 Greens Farms Road
Westport, CT 06880
Contact Person: Thomas G. Reilly, Director of Product Management & Compliance
Phone Number: (203) 221-6553

• TOTAL APPLICATIONS RECEIVED	0
• NUMBER OF THOSE WHO DECLINED TO PROVIDE INFORMATION ON THE PERSONAL WORKSHEET	0
• NUMBER OF APPLICANTS WHO DID NOT MEET SUITABILITY STANDARDS	0
• NUMBER OF APPLICANTS WHO CHOSE TO CONFIRM AFTER RECEIVING SUITABILITY LETTER	0